## Psychoanalyst Continuing Professional Education Record – Required to be kept in your records.

Location (City & State)

**Dates** 

**Category filled** 

Formal or

Informal

# of

**hours** 

**Sponsoring Organization** 

Itemize the education courses taken over the past two years.

**Activity Title** 

I certify, under the pains and penalties of perjury, that all information I have provided in this Continuing Professional Education Record is true and accurate. I understand that furnishing false information may constitute unprofessional conduct and result in the denial of my application for renewal or further disciplinary action. (The maximum penalty for perjury is Fifteen years in prison and/or a \$10,000 fine.) (3 V.S.A. §2901)					
Signature of Applicant Date					

Keep this document with your CE records.